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Facsimile MAIL STOP RCE

To: Exam. Richard Sukyoon Woo, GAU: 3629
Fax No.: (703) 872-9306
From: George M. Macdonald
Date: September 2, 2004
Subject: Serial No.: 10/065,336
Pages: 12 (including this cover)

Re: U.S. Patent Application Serial No.: 10/065,336

Confirmation No.: 2199

Our Docket # F-575

Enclosed please find a Request for Continued Examination in the above referenced application.

CERTIFICATION OF FACSIMILE TRANSMISSION

I hereby certify that the following correspondence is being transmitted via facsimile to:

Patent and Trademark Office
Attention: Exam. Richard Sukyoon Woo, GAU: 3629
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1. Request for Continued Examination (1 page);
2. Amendment Transmittal Letter (2 pages); and
3. Amendment in Response to December 24, 2003 Office Action (8 pages).

on September 2, 2004

Date of Transmission


Signature

George M. Macdonald
Name of Registered Rep.
Reg. No.: 39,284

September 2, 2004
Date

Serial No.: 10/065,336
 Attorney Docket No.: F-575

Patent

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re patent application of:) Attorney Docket No.: F-575
 Jean-Hiram Coffy et al.) Customer No.: 00919
 Serial No.: 10/065,336)
 Filed: October 4, 2002) Examiner: Richard Sukyoon Woo
 Confirmation # 2199) Group Art Unit: 3629
) Date: September 2, 2004

Title: **SYSTEMS AND METHODS FOR USING A DIGITAL PEN FOR FUNDS ACCOUNTING DEVICES AND POSTAGE METERS**

AMENDMENT TRANSMITTAL LETTER

MAIL STOP RCE
 Commissioner for Patents
 PO BOX 1450
 Alexandria, Virginia 22313-1450

Sir:

Transmitted herewith is an amendment in the above-identified application. The fee has been calculated as shown below.

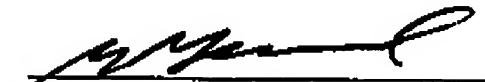
	Claims Remaining After Amendment	-	Highest Number Previously Paid For	=	Number of Extra Claims Present	X	Rate	=	Additional Fee
Total Claims	20	-	20	=	0	X	\$18.00	=	0.00
Independent Claims	3	-	3	=	0	X	\$84.00	=	0.00
TOTAL ADDITIONAL FEE FOR THIS AMENDMENT									0.00

Serial No.: 10/065,336
Attorney Docket No.: F-575

Patent

No fee is believed due with this response.

Please charge any additional fees or credit overpayment to Deposit Account Number
16-1885.

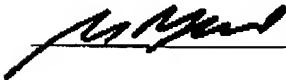


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CERTIFICATE OF FACSIMILE TRANSMISSION

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